

SENATE BILL No. 179

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-41-10.

Synopsis: Exposure of emergency medical services providers. Provides for testing and notification to an emergency medical services provider who has potentially been exposed to a dangerous communicable disease.

Effective: July 1, 2003.

Landske

January 7, 2003, read first time and referred to Committee on Judiciary.

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First Regular Session 113th General Assembly (2003)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2002 Regular or Special Session of the General Assembly.

SENATE BILL No. 179

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 16-41-10-2 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 2. (a) ~~A provider of An~~ **provider of An**
3 emergency medical services **provider** who is exposed to blood or body
4 fluids while providing emergency medical services to a patient may
5 request notification concerning exposure to a dangerous communicable
6 disease under this chapter if the exposure is of a type that has been
7 demonstrated epidemiologically to transmit a dangerous communicable
8 disease.
9 (b) ~~If a provider of an~~ **If a provider of an** emergency medical services **provider** desires
10 to be notified **of results of testing following a possible exposure to**
11 **a dangerous communicable disease** under this chapter, the ~~provider~~
12 ~~of emergency medical services~~ **provider** shall notify the emergency
13 ~~service facility~~ **medical services provider's employer** not more than
14 twenty-four (24) hours after the ~~patient~~ **emergency medical services**
15 **provider** is ~~admitted to the facility~~ **exposed** on a form that is
16 prescribed by the state department and the Indiana emergency medical



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services commission.

(c) The ~~provider of~~ emergency medical services **provider** shall distribute a copy of the completed form required under subsection (b) to the following:

(1) **If applicable**, the ~~receiving~~ medical facility:

(A) **to which the patient was admitted following the exposure; or**

(B) **in which the patient was located at the time of the exposure.**

(2) The ~~facility that employs the provider of~~ emergency medical services **provider's employer.**

(3) The state department.

SECTION 2. IC 16-41-10-2.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 2.5. (a) A patient to whose blood or body fluids an emergency medical services provider is exposed as described in section 2 of this chapter is considered to have consented to:**

(1) **testing for the presence of a dangerous communicable disease; and**

(2) **release of the testing results to:**

(A) **a medical director or physician described in section 3 of this chapter; and**

(B) **the emergency medical services provider.**

(b) **If a patient described in subsection (a) refuses to provide a blood or body fluid specimen for testing for a dangerous communicable disease, the exposed emergency medical services provider, the exposed emergency medical services provider's employer, or the state department may petition the circuit or superior court having jurisdiction in the county;**

(1) **of the patient's residence; or**

(2) **where the employer of the exposed emergency medical services provider has the employer's principal office;**

for an order requiring that the patient provide a blood or body fluid specimen.

SECTION 3. IC 16-41-10-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: **Sec. 3. (a) Except as provided in subsection (b), if a patient to whose blood or body fluids an emergency medical services provider is exposed as described in section 2 of this chapter:**

(1) **is admitted to a medical facility following the exposure or is located in a medical facility at the time of the exposure, a**



physician designated by ~~an emergency~~ the medical service facility shall, **not more than seventy-two (72) hours after the medical facility is notified under section 2 of this chapter:**

(A) **cause a blood or body fluid specimen to be obtained from the patient and testing to be performed for a dangerous communicable disease; and**

(B) **notify the medical director of a facility employing the provider of emergency medical services described in section 2 of this chapter if (1) not more than seventy-two (72) hours after a patient is admitted to the facility the facility obtains information from the patient's records or a diagnosis at the facility that the patient has a dangerous communicable disease; and (2) the provider of emergency medical services has complied with section 2 of this chapter; provider's employer; or**

(2) is not described in subdivision (1), the state department shall:

(A) **arrange for testing of the patient not more than seventy-two (72) hours after the state department is notified under section 2 of this chapter; and**

(B) **notify the medical director of the emergency medical services provider's employer of the results of the testing.**

(b) ~~A provider of~~ **An emergency medical services provider** may, **on the form described in section 2 of this chapter,** designate a physician other than the medical director of the facility that employs the provider of emergency medical services **provider's employer** to receive notification. ~~on the form described in section 2 of this chapter.~~

(c) The notification required by this section shall be made not more than forty-eight (48) hours after the facility determines that a patient **test results establish whether a patient** has a dangerous communicable disease that is potentially transmissible through the **incident exposure.**

SECTION 4. IC 16-41-10-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 4. (a) ~~If medically indicated,~~ **A medical director or** physician notified under section 3 of this chapter shall, **not more than forty-eight (48) hours after receiving the notification under section 3 of this chapter,** contact the ~~provider of~~ emergency medical services **provider** described in section 2 of this chapter to do the following:

(1) Explain, without disclosing information about the patient, the ~~infectious~~ **dangerous communicable** disease to which the ~~provider of~~ emergency medical services **provider** was exposed.



(2) Provide for any medically necessary treatment and counseling to the ~~provider of~~ emergency medical services **provider**.

(b) Expenses of treatment and counseling are the responsibility of the ~~provider of~~ emergency medical services **provider** or the provider's employer.

SECTION 5. IC 16-41-10-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 5. (a) Except as **otherwise** provided in ~~sections 3 and 4 of~~ this chapter, **the medical information referred to in this chapter is confidential, and** a person may not disclose or be compelled to disclose medical or epidemiological information referred to in this chapter.

(b) A person responsible for recording, reporting, or maintaining information referred to in this chapter who recklessly, knowingly, or intentionally discloses or fails to protect medical or epidemiological information classified as confidential under this section commits a Class A misdemeanor.

(c) In addition to the penalty prescribed by subsection (b), a public employee who violates this section is subject to discharge or other disciplinary action under the personnel rules of the agency that employs the employee.

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